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BY
FILED (DROP BOX)
FEB 04 2021
AT SEATTLE
CLERK U.S. DISTRICT COURT
WESTERN DISTRICT OF WASHINGTON DEPUTY

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF WASHINGTON

Alexander, Christopher T.

11 Plaintiff(s),

v.

12 SIEMENS HEALTHINEERS; LINCOLN
FINANCIAL GROUP; Hauser,
Timothy; Timmons, Laura; Mathews, John

13 _____
14 _____
15 _____

21-CV-148JCC
CASE NO. _____

[to be filled in by Clerk's Office]

COMPLAINT FOR EMPLOYMENT
DISCRIMINATION

Jury Trial: Yes No

I. THE PARTIES TO THIS COMPLAINT

A. Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

20 Name Christopher Tristan Alexander
21 Street Address 10616 55th Ave S
22 City and County Seattle, King
23 State and Zip Code Washington, 98178
24 Telephone Number 503-473-3643

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1 B. Defendant(s)

2 *Provide the information below for each defendant named in the complaint, whether the*
3 *defendant is an individual, a government agency, an organization, or a corporation. For an*
4 *individual defendant, include the person's job or title (if known). Attach additional pages if*
5 *needed.*

6 Defendant No. 1

7 Name	Siemens Healthineers
8 Job or Title (if known)	
9 Street Address	220 Gregson Dr
10 City and County	Cary, Wake county
11 State and Zip Code	NC, 27511
12 Telephone Number	800-888-7436

13 Defendant No. 2

14 Name	Hauser, Timothy
15 Job or Title (if known)	Regional Service Manager
16 Street Address	Unknown
17 City and County	Issaquah, King
18 State and Zip Code	Washington
19 Telephone Number	Unknown

20 Defendant No. 3

21 Name	Lincoln Financial Group
22 Job or Title (if known)	
23 Street Address	1300 S. Clinton St
24 City and County	Ft. Wayne
25 State and Zip Code	Indiana, 46802
26 Telephone Number	

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1 Defendant No. 4

2 Name	Timmons, Laura
3 Job or Title (if known)	HR Generalist
4 Street Address	Unknown
5 City and County	Unknown
6 State and Zip Code	Unknown
7 Telephone Number	Unknown
8	
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C. Place of Employment

10 The address at which I sought employment or was employed by the defendant(s) is:

11 Name	Siemens Healthineers
12 Street Address	220 Gregson Dr
13 City and County	Cary, Wake County
14 State and Zip Code	North Carolina, 27511
15 Telephone Number	800-888-7436
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II. BASIS FOR JURISDICTION15 This action is brought for discrimination in employment pursuant to (check all that
16 apply):18 Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e
19 to 2000e-17 (race, color, gender, religion, national origin).20 *(Note: In order to bring suit in federal district court under Title VII, you
21 must first obtain a Notice of Right to Sue letter from the Equal
22 Employment Opportunity Commission.)*23 Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C.
24 §§ 621 to 634.*(Note: In order to bring suit in federal district court under the Age
Discrimination in Employment Act, you must first file a charge with the
Equal Employment Opportunity Commission.)*

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Addendum for Defendants.

Defendant No. 5

Name	Mathews, John
Job or Title (<i>if known</i>)	District Service Manager
Street Address	Unknown
City and County	Unknown
State and Zip Code	Unknown
Telephone Number	Unknown

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1 Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112
 2 to 12117.

3 *(Note: In order to bring suit in federal district court under the
 4 Americans with Disabilities Act, you must first obtain a Notice of Right
 5 to Sue letter from the Equal Employment Opportunity Commission.)*

6 Other federal law (*specify the federal law*):

7

(FMLA 20 U.S.C. § 2611(a) Fair Labor Standards Act ("FLSA"))

8 Relevant state law (*specify, if known*):

9 Relevant city or county law (*specify, if known*):

10 **III. STATEMENT OF CLAIM**

11 Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as
 12 possible the facts showing that each plaintiff is entitled to the damages or other relief sought.
 13 State how each defendant was involved and what each defendant did that caused the plaintiff
 14 harm or violated the plaintiff's rights, including the dates and places of that involvement or
 15 conduct. If more than one claim is asserted, number each claim and write a short and plain
 16 statement of each claim in a separate paragraph. Attach additional pages if needed.

17 I filed a wage and income complaint with the State of Washington due to my employer
 18 removing hours to reduce overtime from my timecard. I also opened an investigation into a
 19 coworker who I believed was harassing a customer. I was subsequently denied promotion,
 20 belittled, intimidated, the target of malicious gossip, and eventually forced to leave the company.
 21 My family leave request was denied by Laura Timmons, who was involved in all levels of the
 22 investigation. I was, in short, retaliated against in a systematic way due to my complaints.

23 A. The discriminatory conduct of which I complain in this action includes (*check all that*
 24 *apply*):

25 Failure to hire me.

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- Termination of my employment.
- Failure to promote me.
- Failure to accommodate my disability.
- Unequal terms and conditions of my employment.
- Retaliation.
- Other acts (*specify*):

B. It is my best recollection that the alleged discriminatory acts occurred on date(s)

February 2nd, 2020. They continue to this day.

C. I believe that defendant(s) (*check one*):

is/are still committing these acts against me.
 is/are not still committing these acts against me.

D. Defendant(s) discriminated against me based on my (*check all that apply and explain*):

- race _____
- color _____
- gender/sex _____
- religion _____
- national origin _____
- age (*year of birth*) *(only when asserting a claim of age discrimination.)* _____
- disability or perceived disability (*specify disability*) _____

E. The facts of my case are as follows. Attach additional pages if needed.

I filed a complaint due to wage and income and a complaint about a coworker harassing a customer. I was systematically denied promotion, insulted, and my reputation was tarnished due to systematic retaliation.

(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)

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1 **IV. EXHAUSTION OF FEDERAL ADMINISTRATIVE REMEDIES**

2 A. It is my best recollection that I filed a charge with the Equal Employment Opportunity
3 Commission or my Equal Employment Opportunity counselor regarding the defendant's
4 alleged discriminatory conduct on (*date*)

5 EEOC 10/01/2020, Washington Department of Labor (DOL) 02/2020.

6 B. The Equal Employment Opportunity Commission (*check one*):

7 has not issued a Notice of Right to Sue letter.
8 issued a Notice of Right to Sue letter, which I
9 received on (*date*)

11/9/2020

10 *(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment
Opportunity Commission to this complaint.)*

11 C. Only litigants alleging age discrimination must answer this question.

12 Since filing my charge of age discrimination with the Equal Employment Opportunity
13 Commission regarding the defendant's alleged discriminatory conduct (*check one*):

14 60 days or more have elapsed.
15 less than 60 days have elapsed.

16 **V. RELIEF**

17 *State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do
not make legal arguments. Include any basis for claiming that the wrongs alleged are
continuing at the present time. Include the amounts of any actual damages claimed for the acts
alleged and the basis for these amounts. Include any punitive or exemplary damages claimed,
the amounts, and the reasons you claim you are entitled to actual or punitive money damages.*

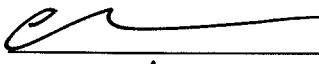
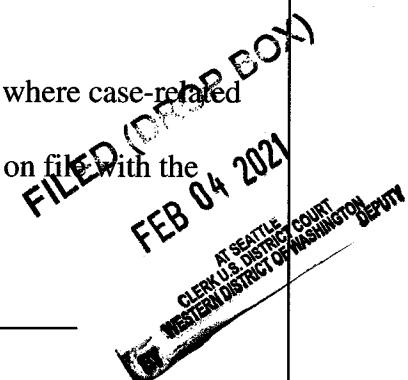
20 Reinstatement at appropriate level and compensation, 1 million in punitive and
21 exemplary damages, injunctive relief to protect my reputation and prevent further damages,
22 injunctive relief to improve training for management for the future, and \$20,000 in real damages

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1 VI. CERTIFICATION AND CLOSING

2 Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my
3 knowledge, information, and belief that this complaint: (1) is not being presented for an improper
4 purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation;
5 (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or
6 reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so
7 identified, will likely have evidentiary support after a reasonable opportunity for further
8 investigation or discovery; and (4) the complaint otherwise complies with the requirements of
9 Rule 11.

10 I agree to provide the Clerk's Office with any changes to my address where case-related
11 papers may be served. I understand that my failure to keep a current address on file with the
12 Clerk's Office may result in the dismissal of my case.

13 Date of signing: 2/4/202114 Signature of Plaintiff 15 Printed Name of Plaintiff Christine Trista Alexander

17 Date of signing: _____

18 Signature of Plaintiff _____

19 Printed Name of Plaintiff _____

21 Date of signing: _____

22 Signature of Plaintiff _____

23 Printed Name of Plaintiff _____